

STATE OF NEW HAMPSHIRE 2018 Statement of Income and Expenses for LOBBYISTS

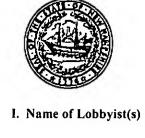
		A Chapter 15)	RECEIVED
P	LEASE PRINT		
I. Name of Lobbyist(s):	Paul A. Worsowicz; Heidi L. Kro	<u>II </u>	JAN 3 0 2019
II. Name of Lobbyist's part	nership, firm or corporation, if any:		NEW HAMPSHIRE DEPARTMENT OF STATE
	GALLAGHER, CALLAHAN &	& GARTRELL, P.C.	
	214 North Main Street, Con	•	•
603-228-1181	603-226-3334	wor	sowicz@gcglaw.com
(Telephone)	(Fax)		(Email)
AUTOLO	OTTO, INC. dba LOTTERY.COM c/o	MULTISTATE ASSO	CIATES INC.
	tions by the lobbyist (including the lobby cular client.	ist's family), or the lobb	ying firm listed below which are
IV. Date of Report:	April 25, 2018 🔲	July 25,	2018 🗆
Reports cover: activity j	from date of registration to 3/31/18	activity from 4/1/	18 to 6/30/18
	October 31, 2018	January 3	30, 2019 🗵
	y from 7/1/18 to 9/30/18	activity from 10/1	1/18 to 12/31/18
	received and no reportable transaction te just this form and submit it to the Secre		
VI. Check if additional rep	orts are attached: ees or made expenditures, you must file	Addendum A – Fees an	d Expenses

VI.		Check if additional reports are attached:
X		If you have received fees or made expenditures, you must file Addendum A – Fees and Expenses
	٦	If you have paid an honorarium or reimbursed expenses, you must file Addendum B - Report of Honorariums or
	لـ	Expense Reimbursement
		If you, your firm, or your family has made political contributions, you must file Addendum C - Political Contributions
C		en Statement/Affirmation by Lobbyist

Sworn Statement/Affirmation by Lobbyist
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm that the foregoing information is true and complete to the best of my knowledge and belief.

(Signature of Lobbyist) Paul A. Worsowicz

(Print Name of lobbyist)



STATE OF NEW HAMPSHIRE Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

I. Name of Lobbyist(s)	Paul A. Worsowicz; Heidi L. Kroll			
II. Name of lobbyist's p	partnership, firm or corporation, if any:			
	GALLAGHER, CALLAHAN & GARTRE	LL, P.C.		
	(Name of partnership, firm or corporati	on)		
III. Name of Client	AUTOLOTTO, INC. dba LOTTERY.COM c/o MULTISTATE ASSOCIATES INC.	Date Ja	nuary 30,	, 2019
lobbying, including fees	t of all fees received from the client identified above for services such as public advocacy, government relatoring legislation, and related legal work. The gross f	ations, or pub	lic relation	s services,
a) Total of all fees received	ved in this reporting period	а)\$.00
	yed this calendar year, prior to this reporting period. e total prior monthly reports for this calendar year.)	b) \$	28,000.00
c) Total of all fees receiv (Add lines a and b)	ved to date.	c)\$	28,000.00
d) Indicate the amount o yet been paid.	f any such fees that are due, but have not	d) \$.00
fees. Separate reports ar lobbyist(s)/firm that are to be reported in one reporting period for sala expenses where the expe the cost was \$25.00 or le purchase of a ceremonial statement of each individual covered by (a) (for exam given to the subject of I legislative reception). E	ertnerships, firms, or corporations are required to refer to be filed for expenditures made relative to each channelated to any one client a separate report may be to of three categories of expenses: (a) the aggregatives, benefits, support staff, and office expenses; (anditure was of \$25.00 or less (for example: meals places, purchase of a pen with a value of less than \$10 to object given to a person being lobbied with a value expenditure made during this reporting period of ple: purchase of a meal with value of greater than \$25, but not greatly objects of the original state of the origi	filed for the fi	penditures lobbyist(s), lexpenses gate total coing a busing the persoless); and \$25.00 for a ceremon, restauran	are made by the firm. Expenses paid during the of all individual less lunch where n being lobbied (c) an itemized any purpose nomial object to be t expenses for a
support staff, and office e	uses for this reporting period for salaries, benefits, expenses, related directly or indirectly to lobbying.	a) \$ b) \$.00
in a), of \$25 or less.		c) \$.00_
c) Total of all itemized e	expenditures reported in detail in section VI.	_		.00_

Lobbyist Fees & Expenses, Addendum A – Page 2 Client: AUTOLOTTO, INC. dba LOTTERY.COM c/o MULTISTATE ASSOCIATES INC	·.		
d) Total expenses for this reporting period. (Add lines a, b and c.)	d)	s	.00
e) Total of expenses paid this calendar year, prior to this reporting period. (This should be the amount on line f of addendum A for last month's report.)	e) .	s	16,100.00
f) Total of all expenses year to date.	f) :	s	16,100.00
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from lobbying fees of period, including by whom paid or to whom charged.	during	this r	eporting
Paid to:		Amount	
	_ \$		
	_ \$		
	- 💃		
	_ s :		
Sworn Statement/Affirmation by Lobbyist I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm that the fo	regoi	ng inf	formation
is true and complete to the best of my knowledge and belief.	.050.		
Sail all orsowing 1-24 (Signature of lobbyist) (D	-19	·	
(Signature of lobbyist) (D	ate)		
Paul A. Worsowicz			
(Print Name of Lobbyist)			

State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums

Sworn Statement/Affirmation by Lobbvist

(Print Name of lobbyist)

Statement of Income and Expenses for:					
Name of Lobbying partnership, firm or corporation: GALLAGHER, CALLAHAN & GARTRELL, P.C.					
Name of Client (leave blank if Statement is for the partnership, firm, or corporation and not related to any particular client): AutoLotto, Inc. dba Lottery.com c/o MultiState Associates Inc.					
Date of Report (check one):					
April 25, 2018 ☐ July 25, 2018 ☐ October 31, 2018 ☐ January 30, 2019 🔀					
I have read RSA 15, RSA 15-B, RSA 664, the Statement of Income and Expenses described above, and the following Addendums submitted with that Statement (insert the number of Addendum forms being submitted):					
1 Addendum A(s).					
0 Addendum B(s).					
0 Addendum C(s).					
I hereby swear or affirm that the foregoing information on the Statement and each Addendum is true and complete to the best of my knowledge and belief.					
(Signature of Lobbyist) (Signature of Lobbyist) (Date)					